FORM D

13021960



UNIFORM

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

OMB APPROVAL OMB Number: 3235-0076

Expires:	May 31, 2005
Estimated ave	rage burden
hours per resp	onse16.00

CE OF SALE OF SECURITIES	SEC USE ONLY			
SUANT TO REGULATION D,	Prefix	Se		
SECTION 4(6), AND/OR	DATE RECEIVED			
LIMITED OFFERING EXEMPTION				

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
LLC Membership Interests	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE STOFFIE
Type of Filing: New Filing Amendment	Service Control of the Control of th
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	700 A
Mexico One, LLC	45
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
53 Lakeshore Drive, Wynantskill, NY 12198	(518) 274-3377
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	
Brief Description of Business	
Raising capital for, and holding membership interests in a limited liability company that wi	ll acquire and develop real estate
Kaising capital for, and nothing membership interests in a filmied mathrity company that wi	
Type of Business Organization	
No. of the second secon	lease specify): Limited Liability Company
business trust limited partnership, to be formed	PROCESS
Month Year	
Actual or Estimated Date of Incorporation or Organization: 0 8 0 4 Actual Estin	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State	·
CN for Canada; FN for other foreign jurisdiction)	DE THOMSON
GENERAL INSTRUCTIONS	FINANCIAL
	111111000000

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, i Fluty, Craig	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
53 Lakeshore Drive, Wy	nantskill, NY 1	2198			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Fuil Name (Last name first, i	f individual)			· <u>·</u> ····	
Kinnon, Robert					
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
749 Western Avenue, A	lbany, NY 122	03			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				:
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	SS (Number and	Street, City, State, Zip Co	ode)		
<u></u>	(Use bla	nk sheet, or copy and use	additional copies of this sl	heet, as necessary)

				В. Г	NFORMAT	ION ABOU	T OFFERI	NG			42	
1. Has the	e issuer sole	d or does th	ne issuer ir	itend to se	ll. to non-a	ccredited i	nvestors in	this offeri	ng?		Yes	No [
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.									ب			
What is the minimum investment that will be accepted from any individual?									\$ n∕a			
										Yes	No	
	=	permit join										
commi If a per or state	ssion or sim son to be lis s, list the na	tion request silar remune sted is an ass ame of the b , you may s	ration for s sociated pe roker or de	olicitation rson or age aler. If me	of purchase ent of a brok ore than five	ers in conne ter or deale e (5) persor	ection with r registered is to be list	sales of sec I with the S ed are asso	curities in the EC and/or	he offering. with a state		
Full Name	(Last name	first, if indi	ividual)									
None Business or	Decidence	Address (N	lumber and	Street C	ity State 7	in Code)						
Dusiness of		Addiess (14	umber and	i Sircoi, C.	ity, State, 2	.ip code)						
Name of As	sociated B	roker or De	aler						 			
States in W	hich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Check	"All State:	s" or check	individual	States)			•••••					l States
IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Full Name	Last name	first, if indi	vidual)									
Business o	r Residence	Address (1	Number an	d Street, C	City, State, 2	Zip Code)			 			
Name of As	sociated Bi	roker or De	aler									
States in W	hich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Check	"All States	s" or check	individual	States)							☐ All	l States
AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Full Name (Last name	first, if indi	vidual)									
Business of	r Residence	Address (N	Number an	d Street, C	City, State, 2	Zip Code)						
Name of As	sociated B	roker or De:	aler							-		
States in W	hich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
		s" or check							***************************************	•••••		States
AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount alreads sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	ζ		
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt	\$		\$
	Equity LLC Membership Interests	\$ 1,000,000		\$ 205,000
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants)	\$		\$
	Partnership Interests			
	Other (Specify)			\$
	Total			\$ 205,000
	Answer also in Appendix, Column 3, if filing under ULOE.	·	_	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	:		Aggregate
		Number Investors		Dollar Amount of Purchases
	Accredited Investors			\$
	Non-accredited Investors			\$_205,000
	Total (for filings under Rule 504 only)	3		\$_205,000
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	:		
	Type of Offering	Type of Security		Dollar Amount Sold
	Rule 505	•		\$
	Regulation A			\$
	Rule 504		-	\$ 205,000
	Total		-	\$ 205,000
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	;	-	200,000
	Transfer Agent's Fees		⊒	\$ 0
	Printing and Engraving Costs	[\$ 0
	Legal Fees		3	\$ 10,000
	Accounting Fees	[\$ <u>0</u>
	Engineering Fees	·····[\$ <u>0</u>
	Sales Commissions (specify finders' fees separately),		_	\$ <u>0</u>
	Other Expenses (identify) Blue Sky filing fees	•	_ Z	\$_2,000
	Total	_	_ Z	\$_12,000
			_	

	C. OFFERING PRICE, NU	MBER OF INVESTORS, EXPENSES AND U	SE OF PROCEEDS		
	b. Enter the difference between the aggregate off and total expenses furnished in response to Part C-proceeds to the issuer."	 Question 4.a. This difference is the "adjust 	ed gross	\$_988,000	
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.				
			Payments to Officers, Directors, & Affiliates	Payments to Others	
	Salaries and fees		s	_ 🗆 \$	
	Purchase of real estate		ss	\$	
	Purchase, rental or leasing and installation of m and equipment			_	
	Construction or leasing of plant buildings and fa	acilities		_	
	Acquisition of other businesses (including the v offering that may be used in exchange for the as issuer pursuant to a merger)	ssets or securities of another		-	
	Working capital				
	Other (specify): Contribution to an affiliate (f				
			\$	\$	
	Column Totals		\$ <u>788,000</u>	\$ 200,000	
	Total Payments Listed (column totals added)	\$ <u>9</u>	88,000		
		D. FEDERAL SIGNATURE			
igı	issuer has duly caused this notice to be signed by t ature constitutes an undertaking by the issuer to f information furnished by the issuer to any non-ac	furnish to the U.S. Securities and Exchange	Commission, upon writt		
ssı	er (Print or Type)	Signature 1	Date		
Μe	xico One, LLC	(you)	September 7	, 2004	
laı	ne of Signer (Print or Type)	Title of Signer (Print or Type)	(i i		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)